



Quality Enhancement Research Initiative

FACT SHEET

ISSUE V

Overview

The Quality Enhancement Research Initiative (QUERI) was launched in FY 1998 by the Health Services Research and Development Service (HSR&D) within the Office of Research and Development (ORD), in order to establish a national system for the translation of research into practice. QUERI's mission is to assure that the best available evidence is used to promote ongoing outcome and system-wide improvement. This is accomplished through pursuit of both a targeted research agenda and rigorous translation activities. Through QUERI, multidisciplinary, condition-specific teams use a systematic approach and structured processes to promote the use of evidence as the basis for clinical decision-making. The impact of translation interventions is then measured and reported. QUERI is one component of an overall organizational commitment to evidence-based quality improvement and is evolving into a national model for assuring that the best possible care is systematically promoted.

The QUERI initiative focuses on eight priority conditions: Colorectal Cancer, Chronic Heart Failure, Diabetes, HIV/AIDS, Ischemic Heart Disease, Mental Health, Spinal Cord Injury, and Substance Abuse. These conditions were selected based on their prevalence among veterans, in addition to the heavy burden of the illnesses, including high financial costs and resource utilization, as well as associated health risks.

The QUERI Process

QUERI uses a six-step process to support the translation of research into outcome and system-wide improvements. Six steps provide a structure for translation activities and form the basis of QUERI's systematic approach: 1) identify high-risk/high volume diseases or problems; 2) identify best practices; 3) define existing practice patterns and outcomes across VA and current variation from best practices; 4) identify and implement interventions to promote best practices; 5) document that best practices improve outcomes; and 6) document that outcomes are associated with improved health-related quality of life.

Translating Research into Practice

Each of the QUERI groups has made remarkable progress in learning how to systematically translate research into practice through the conversion, dissemination, implementation, and evaluation of evidence. Through these specific translation activities, the QUERI groups measure impact using a systems approach that makes evidence-based quality improvement part of routine care. While all eight QUERI groups have their own diverse portfolio of research projects in progress at all times, each group focuses on one specific translation issue for 2-3 year periods. For those issues prioritized for translation, both long-term and short-term projects are pursued so that impact is measured and fed back to decision-makers on an ongoing basis. The collective lessons learned across the

QUERI translation projects are then analyzed and fed back to decision-makers throughout the VA, and to policy makers both inside and outside the Federal government.

QUERI Research Highlights

Below is a sample of the exciting QUERI research being conducted by the groups:

- **Colorectal Cancer (CRC):** CRC ranks second among causes of cancer deaths and accounts for approximately 11% of all new cancer cases. The 5-year relative survival rate is over 90% for people whose CRC is found and treated in Stage I; however, less than 30% of cases are detected in an early stage. Thus, the new CRC QUERI group is focusing its initial efforts on identifying and implementing interventions to promote best CRC screening and colonoscopic follow-up practices.
- **Chronic Heart Failure (CHF):** CHF is a high-utilization condition for VHA. For example, in 1997 nearly half of the patients discharged with a diagnosis of CHF were readmitted within 180 days. The CHF QUERI Coordinating Center, in collaboration with VISN 16, is conducting a two-year project to develop, implement and monitor a case management and educational intervention at several VISN 16 facilities designed to improve the care of patients with CHF and to reduce hospital readmission rates.

- **Diabetes Mellitus (DM):** QUERI Diabetes (DM) is working to reduce the numbers of veterans with diabetes at high risk for preventable morbidity and mortality due to suboptimal blood pressure control (systolic > 140 or diastolic >90), substantial elevations of LDL cholesterol (LDL > 140), and/or substantial elevations in HbA1c (> 9.0%). QUERI DM will target primary care providers in this effort.
- **HIV:** QUERI-HIV is focused on optimizing antiretroviral prescribing practices. VA is the largest provider of HIV care in the US, and research indicates that antiretroviral treatment within VA ranges from exceeding clinical expectations to falling short of professional standards. QUERI-HIV is developing a standard database of patients receiving HIV care in VA, and is testing quality improvement strategies to improve that care.
- **Ischemic Heart Disease (IHD):** The VISN 20 Pilot Translation is a project developed by QUERI IHD to pilot test interventions to improve lipid guideline compliance in VISN 20. Participating physicians, nurses, and pharmacy representatives chose from a menu of possible interventions to improve guideline compliance. Preliminary results show an overall positive trend in lipid guideline compliance in those facilities utilizing interventions.
- **Mental Health (MH):** Mental Health QUERI (MHQ) has found that prescribing rates for the newer antipsychotic agents, which have a

more favorable side-effect profile than traditional antipsychotic medications, vary widely. MHQ is working to improve medication management for schizophrenia by increasing the guideline-concordant use of newer antipsychotics, and by increasing the frequency of prescribing antipsychotics at guideline-recommended doses.

- **Spinal Cord Injury (SCI):** SCI QUERI is focusing efforts on two high frequency, high morbidity areas - respiratory complications and pressure ulcer management in patients with SCI. Topics of importance in respiratory complications include impaired cough, respiratory infections, and sleep apnea. In the area of pressure ulcers, two foci include implementation of clinical practice guidelines and prevention of recurrent ulcers.
- **Substance Abuse (SA):** VA cares for a substantial number of patients who are dependent on opioids. In FY99, the VA served an estimated 25,500 patients who were dependent on opioids (mainly heroin). However, the number of veterans with an opioid dependence diagnosis is almost four times greater than the number receiving methadone maintenance – a well-established, cost-effective treatment for opiate addiction that saves lives. QUERI Substance Abuse is focused on increasing access to and the quality of opioid agonist treatment (primarily methadone) for opioid dependence.

QUERI Solicitations

Many solicitations for research project proposals addressing system improvements in QUERI-targeted areas have been issued. For the most updated information on QUERI solicitations, visit the QUERI website at <http://www.hsr.research.va.gov/queri.cfm>

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